	Ŭ REP	ORT OF LOBBYIST	EMPLOYE	R		
		(Government Code Sect	ion 86116)		1/5	
		or			1	
	_	ORT OF LOBBYING Cal. Code of Regs. Sec		N		
FORM 635 1993						
	REPORT COVERS PI	ERIOD FROM 04/01/201	4 THROUGH	H_06/30/2014	FOR OFFICIAL USE ON	NLY
	CUMULATIVE PERIO	D BEGINNING	01/01/2013		Α	
	to be provided to you pursu	TYPE OR PRINT II ant to the Information Practice slittical Reform Act.		Information	В	
NAME OF FILER:						
RAI SERVICES COM BUSINESS ADDRESS: (No	IPANY AND ITS AFFILIA umber and Street)	(City) WINSTON-S		(Zip Code)	TELEPHONE NUMBER:	
PART I - I FGISI ATI	VE OR STATE AGENCY	LEM ' ADMINISTRATIVE ACTI	NC ONS ACTIVELY	27102	THE PERIOD	
(See instructions on reve		ADMINIOTRATIVE ACTI	ONO ACTIVEET	LOBBILD DOKIN	S THE T ENIOD	
If more space is nee	ded, check box and attach cont	SUMMARY OF PAYM	ENTS THIS PE	ERIOD		
A. Total Payments to	o In-House Employee Lobby	rists (Part III, Section A, Colun	nn 1)	\$	0.00	
		ection B, Column 4)			60144.01	
C. Total Activity Exp	C. Total Activity Expenses (Part III, Section C)					
D. Total Other Paym	nents to Influence (Part III, S	ection D)		\$	105083.14	
GRAND GRAND	TOTAL (A + B + C + D al	pove)		\$	165227.15	_
E. Total Payments in	n Connection with PUC Acti	vities (Part III, Section E)		\$	0.00	_
F. Campaign Contrib	outions: Part IV con	npleted and attached	X No cam	paign contributions m	ade this period	_
		VERIFICA	TION			
tion contained	d herein and in the attache	oreparing this Report. I haved schedules is true and conthe laws of the State of Calif	nplete.		et of my knowledge the infor	ma-
Executed on (Date) 07/31/2014		At (City and State) SAN RAFAEL,CA		By (Signature of Em JASON D. KAU	oloyer or Responsible Officer) NE	
Name of Employer or Respo JASON D. KAUNE	onsible Officer (Type or Print)			Title ATTORNEY & A	GENT FOR FILER	

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PART II - PARTNERS, OWNERS, AND EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO THIS REPORT (See instructions on reverse.)							
Name and Title			Name and Title				
If more space is needed, check box and attach continual	ion sheets.						
PART III - PAYMENTS MADE IN CONNECTIO	N WITH LOBB	YING ACTIVITIE	s				
A. PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS (See instructions on reverse. Also enter the Amount This Period (Column 1) on Line A of the Summary of Payments section on page 1.)			(1) Amount This Period		(2) Cumulative Total To Date		
			\$	0.00	\$	0.00	
B. PAYMENTS TO LOBBYING FIRMS (Including Individual Contract Lobbyists)							
Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances o Other Paymer (attach explana)	nts	(4) Total This Period	(5) Cumulative Total to Date	
FLANIGAN LAW FIRM,THE SACRAMENTO CA 95814	57249.99	2894.02	0.00		60144.01	369330.73	
SACRAMENTO CA 95614							
If more space is needed, check box and attach continuation sheets	Also ente	THIS PERIOD (er the total of Colur ry of Payments sect	nn 4 on Line B of the	\$	60144.0)1	

PERIOD COVERED: 04/01/2014 06/30/2014

NAME OF FILER: RAI SERVICES COMPANY AND ITS AFFILIATES

C. ACTIVITY EXPENSES (See instructions on reverse.)						
Date	Name and Address of Payee	Name and Official Positio of Reportable Persons an Amount Benefiting Each	Description of Consideration	Total Amount of Activity		
			\$		\$	
If more space is needed, check box and attach continuation sheets. TOTAL SECTION C (Activity Expenses) Also enter the total of Section C on Line C of the Summary of Payments section on page 1.						
D. OTHER PAYMENTS TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION NOTE: State and local government agencies do not complete this section. Check box and complete Attachment Form 640 instead. 1. PAYMENTS TO LOBBYING COALITIONS (NOTE: You must attach a completed Form 630 to this Report.) \$ 0.00						
2. OTHER PAYMENTS TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1.						
E. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION Also, enter the total of Section E on Line E of the Summary of Payments section on page 1. (See instructions on reverse.)					\$ 0.00	

PERIOD COV	ERED: <u>04/01/2014</u> (6/30/2014				
NAME OF FIL	ER: RAI SERVICES COMPANY AND ITS A	FFILIATES				
PART IV CAMPAIGN CONTRIBUTIONS MADE (Monetary and non-monetary campaign contributions of \$100 or more made to or on behalf of <u>state</u> candidates, elected state officers and any of their controlled committees, or committees supporting such candidates or officers must be reported in A or B below.)						
in a	e contributions made by you during the p campaign disclosure statement which is tification number, if any, below.					
Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement: Recipient Committee:						
B. Contributions of \$100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization's sponsored committee, must be itemized below.						
Date	Name of Recip	pient	I.D. Number if Committee	Amount		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
				\$		
If more space is needed, check box and attach continuation sheets.						

TEXT ANNOTATION

PAGE 1

Schedule F635 Reference No: 1

PUBLIC NOTE: RAI SERVICES COMPANY IS AN AFFILIATE OF REYNOLDS AMERICAN INC., THE PARENT COMPANY OF R.J. REYNOLDS TOBACCO COMPANY, AMERICAN SNUFF COMPANY, LLC, AND SANTA FE NATURAL TOBACCO COMPANY, INC.

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Schedule F635P3B Reference No: 2165

(PAYMENTS PARTIALLY FOR Q1 2014)